**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZATION		
i Ortivi i	(See instructions)		Office use only
NAME OF COMMITTEE (in	(Check if name Example: If typying, type over the lines	12FE4M5	1 1
CH2M HILL CO	DMPANIES LTD PAC		
ADDRESS (number and	street) 9191 S JAMAICA STREET		
(Check if address is changed)	;	<u> </u>	
	ENGLEWOOD	င္ဝ	80112   - [
	CITY	STATE	ZIP CODE 🛦
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)		
(Check if address is changed)	cjett@ch2m.com		
COMMITTEE'S WED	DACE ADDRESS (LIDL)		
	PAGE ADDRESS (URL)		
(Check if address is changed)			
2. DATE 0 2	1 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	TION NUMBER C C00143305		
4. IS THIS STATEM	NEW (N) OR X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct a	nd complete	
	Ocath In worldated	•	
Type or Print Name of	Treasurer Scott Ingvoldstad		
Signature of Treasurer	Electronically Filed by Scott Ingvoldstad	Date 0 2 d	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED	·	
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Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)